PTO/SB/08A (08-03)

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Substitute for form 1449/PTO	Complete if Known		
	Application Number		
INFORMATION DISCLOSURE	Filing Date		
	First Named Inventor	YOSHIFUMI NISHIDA	
STATEMENT BY APPLICANT	Art Unit		
(Use as many sheets as necessary)	Examiner Name		
Sheet 1 of 1	Attorney Docket Number	SON5180.41A1	

U. S. PATENT DOCUMENTS					
Examiner Initials*	Cite No.1	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevan
		Number-Kind Code <sup>2 (if known)</sup>			Figures Appear
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	Cite No.1	Foreign Patent Document  Publication Date MM-DD-YYYY  Country Code <sup>3</sup> Number <sup>4</sup> 'Kind Code <sup>5</sup> (if known)		Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages	T
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